	Yes 🗌 No 🗸	ĺ	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	er assets, "unearned" in ion?	Exemptions Have you excluded from this report any other ass because they meet all three tests for exemption?	
	Yes No 🗹		Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	proved by the Commit	Trusts Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Offic trusts" need not be disclosed. Have you excluded from this report details of such a trust be child?	
	S	STION	ATION - ANSWER EACH OF THESE QUESTIONS	RUST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE	EX
			schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
	e appropriate	d and the	Each question in this part must be answered and the appropriate	nore Yes ✔ No □	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	.<
			If yes, complete and attach Schedule IX.	 —	If yes, complete and attach Schedule IV.	
	Yes No 🗸	outside	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes • No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	₹
		 	If yes, complete and attach Schedule VIII.	! 	If yes, complete and attach Schedule III.	
	Yes 🗸 No	iling in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes ✔ No	Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the good of the period?	.≡
		!	If yes, complete and attach Schedule VII.	! -	If yes, complete and attach Schedule II.	
	Yes 🗸 No 🗌	han \$305	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	ying Yes 🗌 No 🗸	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	F
			mplete an		If yes, complete and attach Schedule I.	
	Yes No 🗸	ble gift in xherwise	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?	7es □ No 🗸	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	.1
			QUESTIONS	ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION ANSWER EAC	밁
_	more than 30 days late.	more t late.	Termination Date:	☐ Termination	Report Type Annual (May 15) Amendment	771
<i>G</i>	A \$200 penalty shall be assessed against anyone who files	A \$200 be ass	Officer Or Employing Office: Employee		Filer Member of the U.S. State: GA Status House of Representatives District: 11	/6
1.1	(Office Use Only),	(Off	(Daytime Telephone)		(Full Name)	
	間 1018 26 福田: 12 カイ	171F 8007	(202) 225-2931		John Phillip Gingrey	
S	THARFE RESCURDE CENTER	- 1				
J	HAND DELIVERED	¥	FORM A Page 1 of 11 For use by Members, officers, and employees	NTATIVES 1R YEAR 2007	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	Ę C
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If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), debt owed to you by your spouse, or by your or your spouse's child mutual funds (do not use ticker symbols). For all IRAs and other a fair market value exceeding \$1,000 at the end of the reporting period, Government retirement programs. savings accounts; any financial interest in or income derived from U.S parent or sibling; any deposits totaling \$5,000 or less in personal in which you have the power, even if not exercised, to select the specific retirement plans (such as 401(k) plans) that are self directed (i.e., plans in the optional column on the far left. Exclude: Your personal residence(s) (unless there is rental income); any information, see the instruction booklet. its activities, and its geographic location in Block A. For additional that is not publicly traded, state the name of the business, the nature of and its value at the end of the reporting period. For an active business plans that are not self-directed, name the institution holding the account in the account that exceeds the reporting threshold. For retirement land, provide a complete address. Provide full names of stocks and than \$200 in "unearned" income during the year. For rental property or and (b) any other assets or sources of income which generated more Identify (a) each asset held for investment or production of income with investments), provide the value and income information on each asset Asset and/or Income Source Calvert Income Fund Bank of Ellijay Stock American Balanced Fund Allianz OCC Renaissance Fund Calamos Growth & Income **Boeing Stock** 丽 \$100,000 \$250,000 \$100,001 \$250,000 \$100,001 \$50,001 -\$500,000 \$250,001 \$250,000 \$100,001 \$250,000 \$100,001 at close of reporting it is generated income, asset was sold and is method used. If an please specify the than fair market value, valuation method other year. If you use a "None." the value should be included only because Value of Asset Year-End Name John Phillip Gingrey BLOCK B None None CAPITAL GAINS None Farm Income) a brief description in this type of income by writing asset did not generate any apply. Check "None" if CAPITAL GAINS CAPITAL GAINS Partnership income or block. (For example: categories, specify the than one of the listed calendar year. If other Check all columns that income during the Type of Income BLOCK C \$1,001 - \$2,500 NONE NONE \$5,001 - \$15,000 \$5,001 - \$15,000 checking the appropriate NONE "None" if no income was listed as income. Check if reinvested, should be box below. Dividends, even category of income by other assets, indicate the "NA" for income. For all investments, you may write you to choose specific accounts that do not allow For retirement plans or Amount of Income BLOCK D U \$1,000 in exceeding (P), sales (S), or reporting year. exchanges (E) Transaction had purchases Indicate if asset Page 2 of 11 BLOCKE

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SCHED
- ASSETS
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GMB Properties (Alexander Street, Marietta, GA)	Franklin Income Fund	FPA New Income	Ener1 Stock	EMC Corporation Stock	Eaton Vance Worldwide Health Sciences Fund	DWS Global Thematic Fund	Davis New York Venture Fund	Courtyard Properties (Courtyard Street, Auburn, AL)	Conseco Inc. Stock	Community Bank of the South Stock	Coca-Cola Stock	Coca-Cola Enterprises Stock	Church Street Properties (Church Street, Marietta, GA)	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$100,001 - \$250,000	\$100,001 - \$250,000	\$100,001 - \$250,000	\$1 - \$1,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$50,001 - \$100,000	\$250,001 - \$500,000	\$250,001 - \$500,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$50,001 - \$100,000	\$1,001 - \$15,000	\$500,001 - \$1,000,000	OME Name John Phillip Gingrey
RENT	None	None	None	None	CAPITAL GAINS	CAPITAL GAINS	CAPITAL GAINS	RENT	CAPITAL GAINS	CAPITAL GAINS	DIVIDENDS	DIVIDENDS	RENT	llip Gingrey
\$15,001 - \$50,000	NONE	NONE	NONE	NONE	\$5,001 - \$15,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$1 - \$200	\$201 - \$1,000	\$1 - \$200	\$1 - \$200	\$15,001 - \$50,000	
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SP SP Wells Fargo Advantage Wal-Mart Stock SunAmerica Money Market Government Vanguard Healthcare Fund Schwab Money Market Fund America Fund Roche Holdings Stock Washington, DC North Carolina Ave, SE Marietta Outpatient Surgery Capital Series A Stock Index Great Companies Home Depot, Inc. Stock Loomis Sayles Bond Fund Interactive Stock Liberty Media Holding Corp Income Fund of America Liberty Media Holding Corp. \$100,001 -\$250,000 \$15,001 -\$50,000 \$100,001 \$250,000 \$50,001 -\$100,000 \$100,001 -\$250,000 \$15,001 -\$50,000 \$500,001 -\$100,000 \$1,001 - \$15,000 | CAPITAL GAINS \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,000,000 \$50,001 -\$1 - \$1,000 \$1 - \$1,000 \$50,000 \$15,001 -Name John Phillip Gingrey CAPITAL GAINS DIVIDENDS RENT None None CAPITAL GAINS CAPITAL GAINS **CAPITAL GAINS CAPITAL GAINS CAPITAL GAINS CAPITAL GAINS** CAPITAL GAINS INTEREST \$201 - \$1,000 \$2,501 - \$5,000 NONE \$201 - \$1,000 \$201 - \$1,000 NONE \$1 - \$200 \$15,001 - \$50,000 \$201 - \$1,000 \$1,001 - \$2,500 \$1,001 - \$2,500 \$201 - \$1,000 \$1 - \$200 \$5,001 - \$15,000 ס ℧ Page 4 of 11

SCHEDULE III - ASSETS AND "UNEARNED" INCOME WestSide Bank Stock West Cobb Properties (Dallas Hwy, Marietta, GA) \$250,001 -\$500,000 \$500,001 -\$1,000,000 Name John Phillip Gingrey RENT None NONE \$15,001 - \$50,000 Page 5 of 11

SCHEDULE IV - TRANSACTIONS

Name John Phillip Gingrey

Page 6 of 11

transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a

S D	SP	divined of sand of Joseph Paris		
IJ,	Asset	Type of Transaction	Date	Amount of Transaction
	Wells Fargo Advantage Government	ס־	12-6-07	\$100,001 - \$250,000
	Loomis Sayles Bond Fund	יסי 	12-7-07	\$50,001 - \$100,000
	FPA New Income	G	12-6-07	\$100,001 - \$250,000
·	Calvert Income	יסד ו	12-9-07	\$100,001 - \$250,000
	Franklin Income Fund (additional shares purchased)	יים	12-6-07	\$100,001 - \$250,000
:	Dillards Stock	S	8-6-07	\$15,001 - \$50,000
	Biogen Stock	S	8-1-07	\$1,001 - \$15,000
	Calamos Growth Fund	S	8-6-07	\$100,001 - \$250,000
:	Citigroup Inc. Stock	σ	8-1-07	\$15,001 - \$50,000
	Columbia Strategic Value Fund	S	8-6-07	\$100,001 - \$250,000
:	Conseco Series A Stock	S	8-1-07	\$1,001 - \$15,000
_	Delaware Trend Fund	S	8-6-07	\$50,001 - \$100,000

SCHEDULE IV - TRANSACTIONS

Name John Phillip Gingrey

Page 7 of 11

transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a

	The second secon			
SP, DC,	Asset	Type of Transaction	Date	Amount of Transaction
	Embarq Corp. Stock	S	8-1-07	\$1,001 - \$15,000
	General Electric Stock	S	8-1-07	\$15,001 - \$50,000
	Home Holdings Corp Stock	S	8-1-07	\$50,001 - \$100,000
	Matria Healthcare Stock	S	8-1-07	\$15,001 - \$50,000
ļ	Oppenheimer Global Fund	σ	8-10-07	\$15,001 - \$50,000
	Splinex Technology Stock (asset not included on previous reports due to fair market value of less than \$1,000 and no generated unearned income of \$200 or more)	S	8-1-07	\$3.31
	Sprint Stock	S	8-1-07	\$1,001 - \$15,000
i	Time Warner Stock	S	8-1-07	\$1,001 - \$15,000
	Zimmer Holdings Stock	S	8-1-07	\$15,001 - \$50,000
	Allianz OCC Renaissance Fund	S	8-6-07	\$100,001 - \$250,000
	DWS Communications Fund	S	8-10-07	\$15,001 - \$50,000

SCHEDULE IV - TRANSACTIONS

Name John Phillip Gingrey

Page 8 of 11

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief 7 C % **DWS Global Thematic Fund** Asset S(part) **Transaction** Type of 8-1-07 \$50,001 - \$100,000 **Amount of Transaction**

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SCHEDULE V - LIABILITIES

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

Name John Phillip Gingrey

Page 9 of 11

SP, DC,	Creditor	Type of Liability	Amount of Liability
	The Banker's Bank, Atlanta, GA	Promissory Note, for acquisition of Bank of Ellijay Stock	\$100,001 - \$250,000
	Charter Bank, Marietta, GA	Mortgage on Office Building, Church Street, Marietta, GA	\$100,001 - \$250,000
	Community Bank of the South, Marietta, GA	Mortgage on Office Building, Dallas Hwy, Marietta, GA	\$250,001 - \$500,000
	Citibank Commercial Real Estate, San Francisco, CA	Mortgage on Rental Apartments, Alexander Street, Marietta, GA	\$50,001 - \$100,000
	Acadia Federal Savings & Loan, Falls Church, VA	Mortgage on North Carolina Ave, SE, Washington, DC	\$500,001 - \$1,000,000

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SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John Phillip Gingrey

Page 10 of 11

sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging (Y/N)	Food? (Y/N)	Was a Family 9? Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
US Association of Former Members of Congress	Mar. 30 - Apr. 5	DC-Hamburg-Berlin-DC	Υ .	4	\	NONE
Heritage Foundation	Feb. 1-3	DC-Baltimore-DC	~	≺ ′	≺	NONE

. SCHEDULE VIII - POSITIONS

Name John Phillip Gingrey

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representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner (unpaid)	GMB Properties
Partner (unpaid)	Church Street Properties
Partner (unpaid)	Courtyard Properties
Partner (unpaid)	West Cobb Properties
Director (unpaid)	Bank of Ellijay
Director (unpaid)	WestSide Bank